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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)
FY 2005

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)
20677/35590

Application Number	09/686,822	Filed	October 12, 2000
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For **SUPER ABSORBENT COMPOSITION AND ABSORBENT ARTICLE USING THE SAME**Art Unit **3761** Examiner **C. LYNNE ANDERSON**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$

- Applicant claims small entity status. See 37 CFR 1.27.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-3685. I have enclosed a duplicate copy of this sheet.

I 05/10/2006 SDENBOB1 00000013 503685 09686822

I am the applicant/inventor. 02 FC:1251 120.00 DA

assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record. Registration Number 27,787

attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34

William G. Gosz
Signature

5/4/06
Date

William G. Gosz
Typed or printed name

(781) 863-1116
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 5/4/06 Signature: Patricia McKenney (Patricia McKenney)